

Approved for use through 10/31/2002. OMB 0651-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## **REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT**

Application Number	09/966,324	
Filing Date	September 28, 2001	
First Named Inventor	Hildreth, Michael S.	
Group Art Unit	3732	
Examiner Name	Comstock, David C.	
Attorney Docket Number	43702-251979	

To: Commissioner of Pater P.O. Box 1450 Alexandria, VA 22313						
I hereby apply to withdraw as attorney or agent for the above identified patent application.						
The reasons for this reque	st are: Non-payment of legal fees.					
1. ☐ The corresponden	ce address is NOT affected by this withdrawal.					
	spondence address and direct all future correspond	ence to:				
Z. Z. Change the correct	CORRESPONDENCE ADD					
☐ Customer Number OR				ce Customer Nun de Label here	nber Bar	
Firm or Individual Name	Michael S. Hildreth					
Address	401 Mall Boulevard					
Address	Suite 103F					
City	Savannah	State	GA	ZIP	31406	
Country	UNITED STATES OF AMERICA	<u>, , , , , , , , , , , , , , , , , , , </u>	<del>.!</del>	I		
Telephone	912-354-4119	Fax				
This request is enclosed in triplicate.						
Name Ka	trina M. Quicker - Reg. No. 55,554		•			
Signature Katrina M. Quiller						
Date Oc	tober 12_, 2004					
NOTE. Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.						

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Please type a plus sign (+) inside this box

PTO/SB/83 (08-00)

Approved for use through 10/31/2002. OMB 0651-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	09/966,324
Filing Date	September 28, 2001
First Named Inventor	Hildreth, Michael S.
Group Art Unit	3732
Examiner Name	Comstock, David C.
Attorney Docket Number	43702-251979

To: Commissioner of Pate P.O. Box 1450 Alexandria, VA 22313						
•	aw as attorney or agent for the above identified pa	itent applicatio	ก.			
The reasons for this requ	uest are: Non-payment of legal fees.					
•	ence address is NOT affected by this withdrawal.				!	
2.  Change the corre	espondence address and direct all future correspon	idence to:			<u> </u>	
	CORRESPONDENCE AD	DRESS				
☐ Customer Number				ce Customer Numb	er Bar	
OR			Cod	le Label here		
Firm or Individual Name	Michael S. Hildreth					
Address	401 Mall Boulevard					
Address	Suite 103F					
City	Savannah	State	GA	ZIP	31406	
Country	UNITED STATES OF AMERICA			<u> </u>	-	
Telephone	912-354-4119	Fax				
This request is enclosed in triplicate.						
Name K	atrina M. Quicker - Reg. No. 55,554					
Signature	Catrina M. Quelle	Ī				
Date O	October 12 , 2004					
NOTE. Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.						

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Please type a plus sign (+) inside this box

PTO/SB/83 (08-00)
Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	09/966,324	
Filing Date	September 28, 2001	_
First Named Inventor	Hildreth, Michael S.	
Group Art Unit	3732	
Examiner Name	Comstock, David C.	
Attorney Docket Number	43702-251979	

To: Commissioner of Pate P.O. Box 1450 Alexandria, VA 22313		<del></del>				
I hereby apply to withdraw as attorney or agent for the above identified patent application.						
The reasons for this requ	est are: Non-payment of legal fees.					
1. The corresponder	nce address is NOT affected by this withdra	wal.				
2.  Change the corre	spondence address and direct all future cor	respondence	to:			
	CORRESPONDEN	CE ADDRES	S			
Customer Number Place Customer Number B  Code Label here				iber Bar		
Firm or Individual Name	Michael S. Hildreth					
Address	401 Mall Boulevard					
Address	Suite 103F					
City	Savannah	1	State	GA	ZIP	31406
Country	UNITED STATES OF AMERICA					•
Telephone	912-354-4119		Fax			
This request is enclosed in triplicate.						
Name Ka	atrina M. Quicker - Reg. No. 55,554		·			
Signature	atrina M. Quil	Ker				-
Date O	ctober <u>12</u> , 2004					
NOTE. Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.						

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.